

Bureau of Waste Prevention - Recycling Program

# **Municipal Recycling Grant Application – FY 2005**

for equipment, education & technical assistance

# A. Applicant Information

#### Important: When filling out forms on the computer, use only the tab key

only the tab key to move your cursor - do not use the return key.





1. Municipality, Regional Group		
2. Address Line 1		
3. Address Line 2		
4. City/Town	5. State	6. Zip Code
7. Recycling Contact Name	8. Title	
9. Telephone Number (555) 555-5555	10. Fax Number (5	55) 555-5555
11. E-mail Address		

# **B. Items Requested**

1. Select the grant item(s) you are requesting. More detailed information on individual grant items can be found at: <a href="www.mass.gov/dep/recycle/cities.htm#grants">www.mass.gov/dep/recycle/cities.htm#grants</a>

All municipalities must have a Buy	Select Item(s)	Items
Recycled Policy and a CY2003 Recycling Data	а. 🗌	Curbside Recycling Setout Bins
Sheet on file or submit one by the grant	b. 🗌	Recycling Bin Stickers
application deadline in order	c. 🗌	Public Area Recycling Containers
to be eligible to receive a grant.	d. 🔲	Wheeled Recycling Carts
Grant Application Deadline:	е. 🗌	Roll-off Containers
5:00 PM, September 9,	f. 🗌	Consumer Education and Outreach Materials
2004.	g. 🗌	Pay-As-You-Throw Assistance
Non-eDEP filers should return	h. 🗌	Home Composting Bins
applications to: DEP,	i. 🔲	Kitchen Scrap Buckets
Consumer Programs, 1 Winter Street,	j. 🔲	School Chemical Management/Cleanouts
10 <sup>th</sup> Floor, Boston, MA	k. 🗌	Healthy Lawn and Landscape Workshops

**Technical Assistance** 

Water Conservation Tools

Anti-Idling Campaign Toolkit

02108



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## **Massachusetts Department of Environmental Protection**

Bureau of Waste Prevention – Recycling Program

# **Curbside Recycling Setout Bins Request**

**Municipal Recycling Grant Application – FY 2005** 

Α.	Request Information							
1.	. Size of containers requested: ☐ a. 14 gallon ☐ b. 18 gallon							
2.	Request is for:   a. existing curbside program   b. new curbside program							
_	c. If this is a new curbside program, enter the number of households it will serve:							
3.	Number of bins requested – for new programs maxir household plus 5%:	num request is 1 per	# Bins					
В.	Existing Programs Only							
1.	Can your municipality provide 50% matching funds (	i.e. pay for half the cost of requeste	ed bins)?					
	yes no Note: Municipalities who can pro	ovide a match may be ranked highe	r.					
C.	New Programs Only							
1.	What is the program start date?	Start Date (mm/dd/yyyy)						
2.	Type of households included in program - check all that apply:	a. single family b. 2-4 under c. 5 units and up d. other:	it dwellings					
		e. Other Household Type						
3.	Collection frequency:	a. weekly b. biweekly	c. other:					
		d. Other Collection Frequency						
4.	Program operator:	a. municipality b. contracte	ed hauler					
5.	Provide hauler name, if selected:	Hauler Name						
6.	Have funds been appropriated for program operation?	☐ yes ☐ no						
D.	All Programs							
1.	Provide a justification for your curbside bin request. which must be taken by your municipality before bins pass budget through town meeting, etc.) and provide steps.	s can be used (e.g., issue RFR, sig	n contract,					

☐ eDEP online filers check here for more space.



Important:
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# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention – Recycling Program

# **Recycling Bin Stickers Request**

**Municipal Recycling Grant Application – FY 2005** 

1. Indicate quantity for each sticker message you are requesting:

## A. Request Information

These stickers are intended to be distributed to residents who wish to store their recycling in a container other than a municipal issued bin. The stickers are intended to identify to the curbside hauler that the contents of the container are recyclables.

Provide shipping address boxes:  a. Contact Name	s for stickers if diffe	erent from applicant	's address – please do not use P.O.		
a. Contact Name					
b. Street Address Line 1					
c. Street Address Line 2					
d. City/Town		e. State	f. Zip Code		
Indicate method of distribution (e.g. available at DPW; mailed to residents that request the					
	b. Street Address Line 1 c. Street Address Line 2 d. City/Town Indicate method of distrik	c. Street Address Line 2 d. City/Town	c. Street Address Line 2 d. City/Town e. State	c. Street Address Line 2	



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# Massachusetts Department of Environmental Protection

Bureau of Waste Prevention – Recycling Program

# **Public Area Recycling Container Request**

**Municipal Recycling Grant Application - FY 2005** 

# A. Request Information



DEP is offering recycling units that affix to the top of existing trash cans for the collection of deposit bottles and cans in public areas (e.g. parks, mass transit stations, etc). This attractive, "pyramid top" is made from recycled stainless steel and sits on top of cement base and steel top trash containers. It has two 4-inch openings to accept cans and bottles for recycling. The design is scavenger-friendly and therefore has only a 5-gallon capacity, which holds approximately 40 standard sized beverage containers (in public spaces, recyclables are generally removed by the public within a few hours). Drain holes in the bottom of the pyramid top allow liquids to drain into the trash container

1.	Indicate the number of recycling units you are requesting: Quantity
2.	Can your municipality provide 50% matching funds (i.e. pay for half the cost of requested units)?  ☐ yes ☐ no Note: Municipalities who can provide a match may be ranked higher.
3.	Do you currently operate a public area recycling program?  ☐ yes ☐ no
4.	Do you have compatible trash containers?  ☐ yes ☐ no – but I intend to purchase them if awarded a grant.
5.	Indicate intended locations of containers (e.g. 6 municipal parks, 5 train/bus stations, along Main Street, etc.):



**Important:** When filling out

forms on the

## **Massachusetts Department of Environmental Protection**

Bureau of Waste Prevention – Recycling Program

# **Wheeled Recycling Carts Request**

Municipal Recycling Grant Application - FY 2005

# A. Request Information

Carts are for use in multi-family homes, schools, or municipally-sponsored business recycling programs. DEP will award carts to municipalities to distribute in buildings serviced by private haulers/businesses ONLY if the building managers / haulers sign agreements specifying municipal ownership and conditions of use of the carts.

omputer, use only the tab key				·			
o move your ursor - do not se the return ey.	1.	Indicate the number of carts needed (minimum request of 25 carts per category):					
		a. 32-35 Gallon	. 65-68 Ga	llon		c. 94-96 Gallor	n
tab	2.	Select preferred cart vendor:					
return		drop menu here?			ck with your patible cart.	hauler to ens	ure you select a
	3.	Can your municipality provide 50% m	natching	funds (i.e. pa	y for half the	cost of requ	ested carts)?
		yes no Note: Municipalitie	s who ca	n provide a r	match may b	e ranked high	ner.
	В.	Recycling Program Info	matio	n			
Please complete ne following luestions about	1.	These carts will be used for the follow	wing type	(s) of recyclin	ng programs	::	
our recycling rogram, as pplicable.		ex	ample:	25 carts	for	200 units	in 10 buildings
		a. Multi-family program		# of Carts	for	# of Units	in # of Buildings
		b. School program		# of Carts	# o	f Schools	
		c. Municipally sponsored business recycling program		# of Carts	# 0	f Businesses	
	2.	Is the program  a. new or b. 6	existing?				
	3.	If this is a new program, what is the					
		projected start date?		Start Date (mm/dd/yyyy)			
	4.	4. If a new program, identify any remaining steps which must be taken by your municipality before carts can be used (e.g. modify collection contract with hauler, sign agreements with building managers, pass mandatory recycling ordinance, pass budget, etc.) and provide a timeline of dates for accomplishing these steps.					
eDEP online	or						
nore space.							



# **Wheeled Recycling Carts Request**

Municipal Recycling Grant Application - FY 2005

В.	B. Recycling Program Information (cont.)								
5.	Categories of materials collected:	☐ a. paper ☐ b. commingled containers c. ☐ other:							
		d. Other Materials Category							
6.	Collection frequency:	☐ a. weekly ☐ b. biweekly ☐ c. other:							
		d. Other Collection Frequency							
7.	Who operates or will operate the program?	a. municipal crews							
	F2	☐ b. municipally contracted hauler							
		<ul><li>□ c. private hauler/businesses are agreements in place with private haulers/businesses?</li><li>□ yes □ no</li></ul>							
		<ul><li>d. Are agreements in place with private haulers/businesses?</li><li>☐ yes ☐ no</li></ul>							
		e. If municipally operated or contracted, have funds been appropriated for program operation?  ☐ yes ☐ no							
8.	How will carts be distributed and used in	a. supplement existing carts							
	your program?	$\square$ b. first carts to be distributed $\square$ c. other:							
		d. Other Use							
9.	Add any additional information you feel is relev	vant to your request below:							



# Roll-off Containers Request Municipal Recycling Grant Application – FY 2005

# A. Request Information

	1.		and number of divided in a considered.						
Note: Multiple materials should be collected in one roll-off ONLY when all those materials can be tipped at the same location.		a. Size  30 cubic yd. 40 cubic yd.  30 cubic yd. 40 cubic yd. 40 cubic yd.	b. Style     open top     closed top     open top     closed top	c. Material	1	d. Divider, I	Material 2	e. Divider, Mate	erial 3
Important: When filling out forms on the computer, use only the tab key to move your cursor - do not	<ul> <li>Can your municipality provide 50% matching funds (i.e. pay for half the cost of request</li> <li> ☐ yes ☐ no Note: Municipalities who can provide a match may be ranked higher.</li> </ul>							•	s)?
use the return key.	В.	. Program Information							
tab	1.	Who is eligible to	participate in the mu	unicipal drop	o-off prog	ram? (chec	ck all that a	pply):	
return		☐ a. All residents ☐ b. Apartments and condominiums ☐ c. Unrestricted ☐ d. Residents with stickers ☐ e. Small businesses, restaurants, etc. ☐ f. Other:						:d	
		Other Eligible Participants							
	2.		our municipality cur other you rent, own,				ne material	s collected, tons	<b>;</b>
		a. Material collect	ed b. Tons	s / month	c. No.	of rolloffs	d. Own,	rent, DEP grant	:
							own	☐ rent ☐ DEI	⊃ grant
							own	☐ rent ☐ DEF	P grant
							own	☐ rent ☐ DEF	P grant
							own	☐ rent ☐ DEF	P grant
							own	☐ rent ☐ DEF	P grant
	3.	If any of the reque	ested roll-offs will re	place rented	roll-offs,	, what is the	e monthly r	ental fee?	
		Monthly Rental Fee							



# Roll-off Containers Request Municipal Recycling Grant Application – FY 2005

# **B. Program Information** (cont.)

	4.	Identify any remaining steps which must be taken by your municipality before the roll-off(s) can be used (e.g., pass budget at town meeting):
A detailed justification will improve your chances of receiving this grant.	5.	Please state why you need the requested roll-offs and how they will help you to increase the amount of recyclables collected in your program. If requesting roll-off containers for wood waste collection, please describe end-use (e.g., bio-mass, mulch, etc.):
eDEP online filers, check here		
for more space.		



Bureau of Waste Prevention – Recycling Program

1. Number of municipal households:

## **Consumer Education and Outreach Materials Request Municipal Recycling Grant Application - FY 2005**

#### A. Customized Consumer Education Materials

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If awarded a customized grant, you will provide DEP with specific information about your recycling program which will be used to design your education materials using DEP's format. DEP will design, print and mail these education materials directly to your residents. DEP will coordinate the mailing of your customized consumer education materials according to your needs. Mailings must be completed by June 30, 2005.

		c. City/Town	d. State	e. Zip Code				
		b. Street Address						
		a. Contact Name/Organization						
libraries, as inserts in tax bills, at schools, recycling/transfer stations, etc.)	3.	Provide the shipping address for delivery ma Please do not use P.O. boxes:	aterials, if different from ap	oplicant's primary address.				
(through condo associations, town halls,			Distribution: Distribution Method					
be responsible for distribution	does not t mail these s to ents; your cipality will sponsible stribution	<ul><li>☐ c. junk mail reduction kits:</li><li>2. Indicate method of distribution:</li></ul>	Maximum request - not to exceed 10% total municipal households					
items to residents; your		not these	•	·	d. waste reduction bookmarks:	Maximum request - not to exceed 10% total municipal households		
composting. DEP does not direct mail these			b. composting educational brochures:	# Don't Trash Grass	# Home Composting			
and the "how- to's" of backyard			# Springfield MRF	# Springfield MRF Bilingual				
junk mail reduction, multi- family recycling, source reduction,		a. multi-family recycling door hangers:	# English	# Bilingual English/Spanish				
information to residents about	1.	Indicate type(s) and quantities of standardize	ed materials requested:					
These materials offer general	B.	Standardized Consumer Educ	cation Materials					
		consumer education materials, including po	olage only grants.					
		Note: Due to limited funds, DEP may not be materials to the extent it has in the past. DEI consumer education materials, including "po	P is considering options the					
	3.	Postage Only Alternative – Would your municipality be willing to receive a grant in which DEP would only pay the bulk mailing postage costs of a town-designed and printed recycling brochure? (Brochure would have to conform to DEP/postal parameters.)						
return		<ul> <li>a. Recycling chart - curbside and/or drop-off</li> <li>b. Postcard - to announce curbside or drop-off program changes/additions</li> <li>c. New curbside recycling package – includes postcard, chart, and sticker - new programs only</li> </ul>						
tab	2.	Check one box to indicate the type of piece	which you would like to re	ceive:				
key.	١.	# Ho	ouseholds					



# Pay-As-You-Throw New Program Assistance Request Municipal Recycling Grant Application – FY 2005

#### A. Application Information

In Pay-As-You-Throw (PAYT) solid waste programs residents purchase preprinted stickers or bags for disposal of trash, thereby paying directly for the amount of solid waste that they generate, while recycling does not have a direct fee. Grants of up to \$10.00 per participating household served by the municipal solid waste program are provided for new PAYT programs. Grant funds may be used to fund the costs of bags, stickers and other start-up costs of new PAYT programs. Grant funds may be dispersed over a two-year period.

#### Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





1. How many households will be served by your new PAYT program? # Households Served 2. Indicate which method your municipality will utilize for your PAYT program: ☐ a. Bags ☐ b. Stickers ☐ c. Undecided ☐ d. Other – specify: Other Method 3. Estimated start date for PAYT program: Estimated Start Date (mm/dd/yyyy) 4. Recycling collection frequency: a. Weekly b. Bi-Monthly c. Other: Specify Other Collection Frequency a. Drop-off b. Curbside collection 5. How is your municipal trash currently collected? 6. How is your municipal recycling currently collected? 

a. Drop-off 

b. Curbside collection 7. Indicate below what steps have been or need to be taken in order to implement a FY 2005 PAYT program. Prior to grant award all steps below must be completed and documented. Please attach a copy of any supporting documentation currently available that meets the below criteria. a. Program approved by appropriate decision ☐ yes ☐ no making body (BOH, BOS, BOPW, Town Meeting): Target Completion Date (mm/dd/yyyy) b. Operating budget has been approved: ves no Target Completion Date (mm/dd/yyyy) c. Implementation plan / timeline is complete: ☐ yes ☐ no Target Completion Date (mm/dd/yyyy)

If you are just in the program planning stages of PAYT and would be interested in receiving technical assistance for evaluating PAYT or implementing PAYT in your community, please apply for an "in-kind" Technical

Assistance grant.

• Operate the program for at least 2 years.

the following criteria:

Set a fee structure that insures that fixed costs of solid waste collection will be substantially
covered by the tax base or other funding source and variable costs will be placed on the bags or
stickers

8. 

I understand that in order to be eligible for a PAYT grant my municipal PAYT program must meet

- No more than one free bag or sticker may be provided per household per week.
- Drop-off towns must adopt an ordinance or establish permit conditions requiring private subscription haulers to provide integrated solid waste and recycling services to their customers. (i.e., all customers receive recycling collection with trash collection.)



Important:

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## **Massachusetts Department of Environmental Protection**

Bureau of Waste Prevention – Recycling Program

# **Home Composting Bins Request**

Municipal Recycling Grant Application – FY 2005

## A. Request Information

1. Indicate the type and number of bins requested (20 minimum/500 maximum per municipality):

	31			- 1 - 37			
	a. 11 cubic feet New Age Composter	Quantity					
	b. 24 cubic feet New Age Composter	Quantity					
	c. 30 cubic feet New Age Composter	Quantity					
	d. 11 cubic feet Earth Machine	Quantity	 The Earth Machine	New Age Composte			
2.	Request for:   a. existing program – co	mplete section B	. 🗌 b. new program –	skip to section C.			
В.	<b>Existing Program Informati</b>	ion Only					
1.	Indicate the number of bins currently on	hand:		Quantity			
2.	Amount of funds remaining in your dedic	ated compost bir	n account:	Funds Remaining			
3.	3 Total number of hins you have distributed in the program to date:						
C.	New Program Information (	Only		Total Bins Distributed			
1.	Who will coordinate program (take orders	s, answer questio	ons, reorder bins)?				
	Name/Title						
2.	Indicate the bin prices(s) to be charged for	or applicable bin	s:				
	a. 11 cubic feet New Age Composter Price	ster Price					
	c. 30 cubic feet New Age Composter Price	d. 1	1 cubic feet Earth Machine Pr	rice			
3.	. Where will bins be distributed (e.g., Town Hall, DPW, etc.):						
4.	Do you have a dedicated account or gift	account set un (r	required for hin sales/re	orderina)?			
т.	yes no - do you have the necessary appr Note: This may require town meeting app	oval to set up a					

5. Please describe how you will promote your home composting education program:

☐ d. bin demonstration areas ☐ e. other:

☐ a. media promotion ☐ b. brochure distribution ☐ c. school composting program

f. Other Education Program



Bureau of Waste Prevention – Recycling Program

# Kitchen Scrap Buckets Request

**Municipal Recycling Grant Application - FY 2005** 

## A. Request Information

#### Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return



These are 2-gallon pails with lids to be used for residential kitchen collection of scrap food waste that will be added to a backyard compost pile or bin. Buckets are to be used in conjunction with the Home Compost Bin Program. Communities must have a compost program in place or apply for a new program to be eligible for these buckets. Grantees may sell kitchen scrap buckets to residents at cost (\$5.95) to enable grantees to continue the program after the granted buckets are distributed.



1.	This is a: ☐ a. new program ☐ b. existing program	
2.	Indicate number of kitchen scrap buckets requested:	Quantity
3.	How do you plan to distribute/promote kitchen scrap buckets to y	our residents?

_	<u></u>	
1		
Ш	return 🖊	



# **Massachusetts Department of Environmental Protection**

Bureau of Waste Prevention – Recycling Program

## School Chemical Management / Clean-out Request Municipal Recycling Grant Application - FY 2005

#### A. Introduction

DEP is offering grants for creating sustainable chemical management systems in public schools and clearing out stockpiled chemicals. The goals of this program are to reduce the purchasing of unnecessary chemicals, safely manage the chemicals necessary for classroom instruction, and management of the physical plant, and avoid future stockpiling. Schools selected for this grant will receive professional hazardous waste management services to perform a chemical inventory, training on chemical hazard awareness and how to establish and implement a chemical management plan, and up to \$5,000 per school district in clean-out expenses for unnecessary chemicals.

Who is eligible: Individual middle or high schools, or school districts are eligible for this grant. Applications must be submitted by a municipality on behalf of their school district or individual school(s). Due to funding levels, DEP may limit the cleanout to one school per district.

Schools selected for this grant must commit to:

- establishing an environmental health and safety team to implement the project
- developing and implementing a chemical management plan
- an annual chemical storage and safety check by the local Fire Department
- sending a minimum of three officials to a day-long training or two half day trainings on school chemical management
- submitting a summary report to DEP on the actions taken to implement the school's chemical management plan

#### **B. School Information**

	1.	Name of the school or district and the student population:	
eDEP online filers: you will be		a. Name of School or District	b. Student Population
given the opportunity to	2.	Has this school taken any actions to reduce the purchase or use of hazardous chemicals?	
attach documents after completing your individual grant forms.		<ul> <li>□ a. yes – provide a chemical purchasing policy or evidence of chemical reduct micro or small-scale lab curriculum. eDEP filers please attach, paper filers p</li> <li>□ b. no</li> </ul>	
	3.	Has this school performed a chemical cleanout in the past?	
		a. yes – give a description of the measures taken, with relevant dates, below	□ b. no
		c. description	
	4.	Does this school have an existing environmental health and safety coordinator of	r team?
		a. yes - describe their activities to date below.	
		c. description	
	5.	Name of staff person responsible for implementation of the school chemical man	nagement plan:
		Name of Staff Person	
	6.	Is the school able to pay a nominal fee to cover the chemical pre-screen costs (\$	5500 - \$1000)?
		☐ yes ☐ no	
Note: this is a mandatory requirement.	7.	Provide documentation of support from the Board of Selectmen, Fire Departmen Principal or Superintendent - eDEP filers please attach, paper filers please mail	



# Healthy Lawns and Landscape Workshops Request Municipal Recycling Grant Application – FY 2005

#### A. General Information

Important:
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DEP is offering workshops to teach residents how to manage their lawns and landscapes without pesticides and chemical fertilizers. These workshops focus on increasing the overall health of lawns and landscapes by building soil health and using best management practices which reduce or eliminate the need for irrigation, pesticides and fertilizers. Participating residents will receive a "pesticide-free" lawn sign.

Municipal Benefits:

- Help municipalities meet Federal NPDES stormwater system requirements for public education;
- Increase environmental protection and improve public health through reduced use of toxic chemicals;
- Reduce contamination of groundwater, drinking water and water bodies by pesticides and fertilizers:
- Reduce amount of organic waste requiring collection and disposal by encouraging composting;
- · Conserve water: and
- Increase biodiversity due to reduced toxic chemicals in the environment.

To be eligible, municipalities will need to provide a suitable venue; work with other municipalities and community groups in the area to maximize attendance and impact of the workshop and publicize the workshop using materials provided by DEP (e.g. through local newspapers, cable TV, public offices, libraries, etc.)

First consideration will be given to municipalities that have implemented or are working on municipal pesticide reduction policies (to reduce use of pesticides on municipal property).

В.	B. Municipal Information			
1.	Can the municipality provide a venue that will accommodate up to 25 people?			
2.	Have you implemented or taken steps towards implementing a municipal pesticide reduction policy(ies)? ☐ a. yes – describe below ☐ b. no			
	c. Describe			
3.	Indicate what other steps your municipality has taken to reduce the use of pesticides on municipal properties:			
4.	Name the staff person responsible for coordinating and prompting the workshop locally:			
	a. Name/Title or Position			
	b. Phone Number (555) 555-5555 c. E-Mail (optional)			



Bureau of Waste Prevention – Recycling Program

## **Customized Technical Assistance Grant Application – FY 2005**

## A. Applicant Information

DEP is offering customized technical assistance grants (CTAGs) in the form of funds and/or dedicated staff to assist municipalities and regional groups with innovative waste reduction and sustainability projects.

I have reviewed the following technical assistance grant supporting document prior to submitting my technical assistance proposal:

Technical Assistance Grant Description and Proposal Criteria

To apply for a customized technical assistance grant, please complete the information below, and attach a written proposal (3-4 page maximum) that addresses the elements described in the Proposal Criteria.

#### Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return





	1. Applicant Organization		
	2. Contact Name	3. Title	
	4. Telephone Number (555) 555-5555	5. E-mail Address	
	6. Technical Assistance Project Title		
	7. Dollar Amount Grant Request		
8.	Is this a regional group application? $\square$ yes $\square$ no		
9.	Important: In lieu of funding, are you interested in in-kind assistance (i.e. a specified number of horizon an MRIP coordinator or DEP staff person) to implement your technical assistance project?		
	☐ yes − estimate number of hours needed, below	□ no	
	Number of Hours Needed		
10.	☐ I will be attaching my written proposal OR		
11.	☐ I will be submitting my written proposal separate	ly via mail.	

eDEP online filers: you will be given the opportunity to attach documents after completing your individual grant forms.

All proposals not submitted electronically with this grant application MUST be submitted by the application deadline to be considered eligible. Submit separate written proposals to:

Recycling Grants
DEP, Municipal Waste Reduction Program
1 Winter Street, 10th floor
Boston, MA 02108



Bureau of Waste Prevention – Recycling Program

## **FY 2005 Technical Assistance Grants**

#### Overview

DEP is offering customized technical assistance grants (CTAGs) in the form of funds and/or dedicated staff to assist municipalities and regional groups with innovative waste reduction and sustainability projects.

The application for a customized technical assistance grant (CTAG) requires a 3-4 page written proposal including a budget and timeline. CTAG projects can range in size from \$5,000 to \$25,000. DEP may award direct funding, dedicated staff time (i.e. the in-kind services of an MRIP coordinator or DEP staff person), or a combination of both. It is desirable that technical assistance projects be completed by the end of FY05. However exceptions may be made to allow projects to be funded beyond FY05, pending appropriation of funds.

**In-Kind Only TA Grants:** Communities in need of just technical assistance from staff, need only submit the Proposal Criteria items marked with an asterisk (see pages 3 and 4). *DEP will accept and evaluate early requests for in-kind technical assistance grants from communities who are able to use immediate assistance (able to start by the beginning of September, 2004).* Early requests should be submitted in written format only, not through the eDEP on-line application.

**Eligible Projects:** Technical assistance grants are intended to support implementation of pilot waste reduction programs (i.e. organics, source reduction, or hazardous household product management) and sustainability initiatives (i.e. water conservation, transportation mitigation, air pollution reduction). DEP is interested in funding projects that are cost effective, have potential to serve as a model for other communities, draw on public/private partnerships and resources, and will help achieve the goals of DEP's *Beyond 2000: Solid Waste Master Plan.* 

**Please note:** This year, DEP has broadened the scope of eligible projects for technical assistance grants to include *sustainability initiatives*. Sustainability initiatives encompass a range of activities and programs designed to conserve resources, reduce waste and prevent pollution of air, land and water. DEP will consider proposals for projects that foster sustainable practices by Massachusetts residents, businesses, or municipal governments.

#### Examples of sustainability initiatives include, but are not limited to:

- Promote residential water or energy conservation through outreach campaigns
- Form a regional pesticide reduction and healthy lawn care education network
- Establish a rain barrel distribution program for residents
- Conduct municipal energy audit and obtain utility rebates for lighting or HVAC retrofits
- Form a community-based "Eco-Team" to educate residents about sustainable lifestyle practices
- Develop source separation and collection of wood waste for conversion to biomass fuel.

#### Other types of technical assistance projects that DEP is interested in funding include:

- Surplus property diversion programs and other source reduction initiatives at the commercial, local government and/or consumer sectors.
- Organics/food waste collection and composting
- Construction and demolition recycling/reuse
- Recycling and waste reduction programs for businesses
- Establishment of regional hazardous household product collection programs



Bureau of Waste Prevention – Recycling Program

## **FY 2005 Technical Assistance Grants**

## **Eligible Applicants**

#### Applications will be accepted from the following entities:

- Municipalities (Department of Public Works, Boards of Health, schools, etc.)
- Regional government entities, such as solid waste management districts or cooperatives that have a
  government vendor number
- Non-governmental entities that have a government entity (e.g. a city, town) sponsoring the application. These organizations could include business associations, non-profit organizations, and regional planning organizations.

DEP encourages partnerships among municipalities, public schools and school districts, non-profit organizations, solid waste/recycling professionals, and municipal departments (e.g. boards of health, conservation commissions, etc). If you have questions about partnerships relative to your grant, please call Peggy Harlow at 617-292-5861.

**Regional group applications:** Regional applications are strongly encouraged. A regional application that is submitted by more than one municipality must identify a <u>lead municipality</u> to serve as the contracting agent on behalf of the regional group. The lead municipality should submit the <u>only</u> application for the group. The lead municipality will enter into a contract with DEP, will accept funds provided, and will be responsible for overseeing execution of the terms and scope of the contract. Please identify the lead municipality for your regional group in your proposals.

**Use of Funds:** Funds may be used to hire a project coordinator or consultant, purchase equipment or supplies, or to cover certain operating costs for pilot programs only\*. Grant monies are provided on a reimbursement basis, therefore applicants must have the ability to pay for project costs up front and then be reimbursed by DEP.

**Note:** Technical assistance grants are not for the daily management and operational costs of municipal programs (e.g. salaries, capital replacement costs). Pilot program operational costs will only be considered for the portion that is above and beyond regular operational costs. Pilot programs that show potential for sustainability beyond the pilot period will be viewed most favorably.

**DEP Assistance with CTAG Proposal Development:** DEP staff members are available to answer your questions and advise you on proposal ideas prior to submittal. You are strongly encouraged to contact DEP staff to discuss your proposal ideas prior to submitting the grant application. Please contact Peggy Harlow at 617-292-5861 and she will refer you to the appropriate staff person.

#### **Examples of Topics for Technical Assistance Proposals**

Please note that this list is *not* all-inclusive. DEP will entertain any innovative waste reduction and recycling proposal from an eligible applicant.

- Develop and implement a consumer-oriented campaign to reduce the use of pesticides in home lawn and yard care.
- Establish a neighborhood-based outreach and education program to encourage source reduction and environmentally friendly practices. This could be modeled after the "Eco-Team" approach or could be an aggressively managed block leader program.
- Establish a "Green Team" for your municipality or institution. This working group should be composed of employees that will develop and implement source reduction and cost savings initiatives.



Bureau of Waste Prevention – Recycling Program

## **FY 2005 Technical Assistance Grants**

## Eligible Applicants (cont.)

- Establish food waste collection programs for restaurants, commercial generators, and institutions.
- Establish on-site and off-site food waste diversion/composting programs at schools, municipal buildings, etc.
- Establish and promote a program that requires C&D waste recycling plans from contractors who are constructing, renovating or demolishing municipal buildings.
- Implement a building deconstruction pilot project or program to demonstrate the feasibility of on-site reuse and recycling of used building materials.
- Implement a municipally sponsored business recycling program (eligible expenses could include start-up costs such as staff or intern time, promotional materials, etc.)
- Research feasibility, bid and execute a solid waste/recycling "franchise"-like agreement on behalf of the businesses in your municipality.
- Develop a regional approach to marketing recyclables or purchasing or promoting the purchase of recycled products. This may involve school purchasing consortiums.
- Establish a public space recycling initiative at a public transportation center or other public space. The project should include an outreach campaign to foster participation in the program.
- Pilot expanded curbside recycling collection methodologies (e.g. increased recycling capacity via second or larger (up to 32 gallon) recycling container or cart; pilot single stream recycling.) This would be considered as a two-year grant.
- Planning assistance for evaluating and implementing a Pay-As-You-Throw program.

### **Proposal Criteria**

Note: Applicants for in-kind only grants need to provide only those criteria marked with an asterisk (\*).

\*Title: Please assign your project a title consisting of 8 words or less.

\*Brief Project Description: Describe the project you are proposing in general terms (one paragraph)

\*Goals and Objectives: Identify the project goals and objectives and the reason why this grant is important to your community (communities). Discuss any challenges or barriers you are attempting to overcome, and what benefits the project will provide to your municipality or municipalities in your region. If you are proposing to purchase equipment to enhance a particular activity, please include a cost-benefit analysis.

**Deliverables:** Identify the *key milestones* and *tasks* to be accomplished. Be as specific as possible about the steps that you are proposing. Note: All funded projects must provide DEP with a detailed final report describing the accomplishments, barriers, costs (if appropriate) and lessons learned. Please keep this in mind when developing your budget.

\*Timeline: Provide a timeline identifying when specific tasks would be completed. If the project scope is small enough to complete within 6-8 months from the date of award, then the project will be treated as a FY2005 project only and all work must be completed by June 30, 2005. *Projects that may require multiple years of funding to complete should include yearly goals, deliverables and budgets.* 

**Project Evaluation:** Identify specific performance benchmarks and describe how you will evaluate or measure the success of the proposed project. If appropriate, discuss baseline data available and data collection methodologies.



# **FY 2005 Technical Assistance Grants**

# Proposal Criteria (cont.)

**Budget:** Provide a detailed budget for the project. The budget should identify all items or services for which you are requesting funding, including equipment, outreach materials, coordinator or consultant costs, etc.) Any matching funds or services-in-kind that the applicant will provide should also be included and identified as such.

**Resources:** Identify the municipal staff person who will serve as the project coordinator and other key personnel such as consultants or subcontractors that will involved. Provide a statement of qualifications or resumes for key people implementing the tasks.

**Letters of Support or Interest:** To the extent that other municipalities or partner organizations are involved in the project, please attach letters of support.



Name of Municipality

# Water Conservation Tools Municipal Recycling Grant Application – FY 2005

#### A. Introduction

DEP is offering two new grant items to promote conservation of water in the residential and small business setting: rain barrels for the collection of rain from household gutters and downspouts, and water conservation kits. These tools can help residents and small businesses to reduce the demand on municipal water supplies and protect the local water table. Diverting rainwater from storm sewers also helps prevent erosion and reduces effluent which otherwise flows into rivers and lakes.

A **rain barrel** is a rainwater storage system that is connected to a down spout from a house or building. These 100% recycled barrels connect directly to your gutter's down spout and have an overflow valve and a spigot for attaching a hose or filling containers for hand watering.

The water conservation kit will help residents detect leaks in faucets and toilets, determine if their fixtures are water efficient, and offer tips on how to make their homes "water tight and waste free". It includes the following items:

- 1 chrome, low-flow showerhead with a massage setting.
- 1 roll of Teflon tape for installing the shower head.
- 1 1.5 g.p.m. bathroom faucet aerator with dual threads.
- 1 package of dye tablets to check for toilet leaks.
- 1 swivel faucet aerator for the kitchen.

Municipalities applying for these items must agree to sell them to the public at a discount. Revenue from sales must be placed into a dedicated account, from which the municipality will continue to reorder barrels and water conservation kits until the funds are depleted or the public demand is met.

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.

Important:





Non-eDEP filers should return applications to: DEP, Consumer Programs, 1 Winter Street, 10<sup>th</sup> Floor, Boston, MA 02108

## **B.** Request Information

Source (e.g., well water, MWRA, etc.)

1.	Number of rain parrels requested:
	Quantity (should not exceed the equivalent of 5% of the number of households in your municipality)
2.	Type/style of rain barrels requested:
	Sky Juice Rain Barrel New England Rain Barrel
3.	Number of water conservation kits requested:

4. What is the source of your municipal water supply?

5. How will your municipality publicize the availability of these items?

Quantity (should not exceed the equivalent of 5% of the number of households in your municipality)



# **Water Conservation Tools**

**Municipal Recycling Grant Application – FY 2005** 

# **B. Request Information (cont.)**

	Title
9.	Please identify (by title) the municipal employee who will coordinate the distribution of rain barrels and/or water conservation kits.
8.	Please describe any conditions or circumstances in your community that would support the implementation of a rain barrel and/or water conservation kit initiative:
	If yes, please explain
	□ yes □ no
7.	If you answered "no" to Question 6, do you anticipate any particular barriers to establishing this type of account? (Note: This may require town meeting approval.)
	□ yes □ no
6.	Does your municipality have an existing dedicated or gift account, such as a home composting bin account, that can be modified to include rain barrels and/or water conservation kits?



Name of Municipality

# Anti-Idling Campaign Toolkit Municipal Recycling Grant Application – FY 2005

#### A. Introduction

Exhaust from motor vehicles is a major contributor to local and regional air pollution. These pollutants, in turn, impact the heath of our communities. An idling automobile can emit two times more pollutants and greenhouse gases than one that is moving. These pollutants lead to aesthetic and environmental degradation and they negatively impact human health. A particular concern is emissions from diesel vehicles, containing fine particles that can be inhaled deeply into the lungs. Unnecessary idling also wastes fuel and money. Encouraging people to reduce the amount of time they idle by posting "anti-idling" signs and providing other messaging can be very effective. Anti-idling signs can be used to educate drivers about DEP's idling regulation, 310 CMR 7.11. This regulation prohibits unnecessary idling in excess of five minutes.

Communities interested in developing an anti-idling campaign can apply for an anti-idling toolkit that includes signs for posting in public spaces (schools, transfer stations, mass transit pick-up/drop-off areas) and sample press releases and fact sheets for distribution to the public.

# Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return





Non-eDEP filers should return applications to: DEP, Consumer Programs, 1 Winter Street, 10<sup>th</sup> Floor, Boston, MA 02108

# **B. Request Information**

1.	Please identify (by title) the municipal employee who will coordinate your anti-idling outreach campaign and the distribution of anti-idling signs.		
	Title		
2.	Describe any existing efforts in your community that would either support or be complemented by this activity.		
3.	Please identify any partner organizations and/or inter-departmental initiatives that would be part of an anti-idling campaign.		
1.	Describe how and where your community plans to use the signs. (Will they be posted at schools, public works sites, mass transit stations, etc.?)		



#### Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





## **Massachusetts Department of Environmental Protection** Bureau of Waste Prevention – Recycling Program

# **Municipal Recycling Grant Priority Ranking**

for equipment, education & technical assistance - FY 2005

## A. Priority Ranking

1. Please rank in order of priority the items you are requesting (e.g., 1 = first choice 2 = second choice, etc.)

	Items		Rank Priority	
	a.	Curbside Recycling Setout Bins		
	b.	Bin Stickers		
	c.	Public Area Recycling Containers		
	d.	Wheeled Recycling Carts		
	e.	Roll-off Containers		
	f.	Consumer Education and Outreach Materials		
	g.	Pay-As-You-Throw Assistance		
	h.	Home Composting Bins		
	i.	Kitchen Scrap Buckets		
	j.	School Chemical Management/Cleanouts		
	k.	Healthy Lawn and Landscape Workshops		
	I.	Technical Assistance		
	m.	Water Conservation Tools		
	n.	Anti-Idling Campaign Toolkit		
В.	Ce	ertification		
1.		Our municipality has made a Buy Recycled commitment by adopting an ordinance, by-law or olicy to buy products made of recycled content in lieu of virgin products (when recycled products are eadily available, of comparable quality and cost competitive).		
2.		Our municipality has a CY2003 Recycling Data Sheet on file with DEP or		
3.		We intend to submit a Data Sheet by the grant deadline.		
	for info	m the municipal official with authority to apply and accept state grants, and I certify that the ormation provided here is accurate to the best my knowledge."	Signature Print Name	
			Title	
			Date (mm/dd/yyyy)	